



Examination Application For:
• ISA84 SIL Selection Specialist Exam
or
• ISA84 SIL Verification Specialist Exam

DIRECTIONS: Complete all relevant sections of the application after reading the ISA84 Safety Instrumented Systems Certificate Program Requirements and Prerequisites at www.isa.org/isa84certificate. The ISA84 SIL Selection Specialist Exam and the ISA84 SIL Verification Specialist Exam are given electronically, and in English only. You must have received the ISA84 SIS Fundamentals Specialist Certificate and have met the minimum experience requirements in order to apply for the ISA84 SIL Selection Specialist Certificate or the ISA84 SIL Verification Specialist Certificate.

Original applications are required—photocopies and faxes do not qualify. Incomplete applications will be returned unprocessed.

Applications must be received by ISA at least six (6) weeks prior to the course date. It is your responsibility to thoroughly review all requirements and prerequisites.

Section A. APPLICANT INFORMATION (Please print or type.)

Prefix: [ ] Mr. [ ] Mrs. [ ] Ms. [ ] Miss [ ] Other
Last/Family Name First/Given Name
Middle Initial Maiden/Former Last Name
ISA Member: [ ] Yes – Member Number [ ] No – Customer Number [ ] New to ISA
Job Title
Company Name
Preferred Mailing Address: [ ] Home [ ] Office All ISA materials will be mailed to this address.
Address
City State/Province
Postal Code Country
Telephone ( ) Fax ( )
Email Address
Current Supervisor's Name Title
Company Address
City State/Province Postal Code
Telephone ( ) Fax ( ) Email Address

If you have a disability or religious obligation that requires testing accommodations, please check the appropriate box below. Attach documentation of your disability or religious obligation to this application and provide an explanation of the testing accommodation you require.

- [ ] ADA defined disability [ ] Religious obligation

Check your job function:

- [ ] Control Systems Engineering (B) [ ] Engineering Consulting (AG) [ ] Engineering Management (3) [ ] Measurement, Testing, Quality, or Standards Engineering (I) [ ] OEM Product/Systems Engineering (AQ) [ ] Plant Engineering, Operations, and Maintenance (E) [ ] Product Design Engineering, including applied R&D (1) [ ] Production Engineering (D) [ ] Safety Systems Engineering (AJ) [ ] Systems Design Engineering (S) [ ] Systems Integration (H) [ ] Technical or Engineering Support (K) [ ] Factory Automation Systems (AD) [ ] Integrator/Reseller (4) [ ] Networking/Communication Systems (AP) [ ] Plant Information Systems (G) [ ] Software Engineering (F) [ ] Supply Chain Management (AH) [ ] Education (N) [ ] General or Corporate Management (A) [ ] Marketing or Sales (O) [ ] Research & Development (J) [ ] Other [ ] Petroleum Refining & Related Industries (2900) [ ] Pharmaceuticals (2830) [ ] Primary Metals (3300) [ ] Pulp, Paper & Allied Products (2600) [ ] Rubber & Miscellaneous Plastics (3000) [ ] Semiconductors & Electronic Components (3670) [ ] Textiles (2200) [ ] Valves, Fittings, Fabricated Metal Products (3400) [ ] Transportation – Aerospace (3760) [ ] Transportation – Automotive (3710) [ ] Utilities – Electrical (4910) [ ] Utilities – Natural Gas (4920) [ ] Utilities – Pipelines except Natural Gas (4600) [ ] Utilities – Water/Wastewater (4940) [ ] Communications/Data Distribution (4810) [ ] Construction (1700) [ ] Education (8200) [ ] Engineering Services (8710) [ ] Government (9100) [ ] Instrument & Control Apparatus Sales & Service (5000) [ ] Management Consulting (8740) [ ] Research, Development, & Testing (8730) [ ] Systems Integration (7370) [ ] Other

### Applying for

- ISA84 SIL Selection Specialist Certificate (Course EC52)
- ISA84 SIL Verification Specialist Certificate (Course EC54)

**Course Registration and Exam Registration:** Please register for the certificate program course and exam below. Visit [www.isa.org/training](http://www.isa.org/training) to view scheduled course offerings.

- I have registered for the certificate program course and paid all fees online (Skip to Section B).
- I have provided payment for the certificate program course and exam with this application. (Complete chart below.)

<b>Course Registration</b>				ISA	
Course #	Course Title	Course Date(s)	Location	Member	List
EC52	Advanced SIL Selection			\$1,295	\$1,455
EC54	Advanced Design and SIL Verification			\$1,295	\$1,455
<b>REGISTRATION SUBTOTAL</b>				<b>\$</b>	_____

### Section B. EXAM LOCATION INFORMATION

ISA84 Safety Certificate exams are given electronically through Prometric testing centers worldwide. To locate a test center near you, visit [www.prometric.com/isa](http://www.prometric.com/isa). After you complete the training course required for the certificate program for which you are registering, you will be emailed an eligibility code to schedule your exam with Prometric.

#### EXAM ELIGIBILITY CRITERIA

If you are applying for ISA84 SIL Selection Specialist (Certificate 2), complete Sections **C** and **E** below.  
If you are applying for ISA84 SIL Verification Specialist (Certificate 3), complete Sections **D** and **E** below.

### Section C. APPLICANTS FOR ISA84 SIL SELECTION SPECIALIST (CERTIFICATE 2)

If you are applying for the ISA84 SIL Selection Specialist Certificate, please complete the following and then skip to Section E. If you are applying for the ISA84 SIL Verification Specialist Certificate, skip to Section D.

1. ISA84 SIS Fundamentals Specialist Certificate is required.

Indicate the date you received this certificate: \_\_\_\_\_

2. Two (2) day ISA instructor-led training course **Advanced SIL Selection (EC52)** is required.

Indicate the date/location of the course you are currently registered to attend:

Date \_\_\_\_\_ Location \_\_\_\_\_

3. Five (5) years experience in the process industry is required. (Document this experience in Section E.)

4. Supervisor Verification of Experience in Process Safety

**Applicant:** Please have your supervisor verify that you have a minimum of two (2) years experience in process safety by completing the information below.

**Supervisor:** Please complete this section for Applicant verifying that Applicant has a minimum of two (2) years experience in process safety that covers:

- OR**
- Facilitation of and/or participation in PHA (process hazard analysis)
- Performed SIL determination/selection under supervision or independently

**Supervisor Verification of Applicant's Process Safety Experience**

Supervisor's Name and Title \_\_\_\_\_  
Email Address \_\_\_\_\_  
Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

I verify that applicant has had a minimum of two (2) years experience in process safety:

- Facilitation of and/or participation in PHA (process hazard analysis)
- OR**
- Performed SIL determination/selection under supervision or independently

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section D. APPLICANTS FOR ISA84 SIL VERIFICATION SPECIALIST (CERTIFICATE 3)**

If you are applying for the ISA84 SIL Verification Specialist Certificate, please complete the following. If applying for the ISA84 SIL Selection Specialist Certificate, complete Section C.

1. ISA84 SIS Fundamentals Specialist Certificate is required.

Indicate the date you received this certificate: \_\_\_\_\_

2. Two (2) day ISA instructor-led training course **Advanced Design and SIL Verification (EC54)** is required.

Indicate the date/location of the course you are registered to attend:

Date \_\_\_\_\_ Location \_\_\_\_\_

3. Five (5) years related experience in the process industry is required. (Document this experience in Section E.)

4. Supervisor Verification of Experience in Process Industry

**Applicant:** Please have your supervisor verify that you have a minimum of two (2) years experience in process industry by completing the information below.

**Supervisor:** Please complete this section for Applicant verifying that Applicant has a minimum of two (2) years experience in process in the following or closely related areas:

- Specifying instruments and control systems
- Programming PLCs
- SIL verification calculations
- Creation/modification of I&C design documents (e.g., process flow diagrams, P&IDs, loop diagrams, etc.)
- Supporting start-up (including installation, commissioning, etc.)
- Operation of process plants/facilities

**Supervisor Verification of Applicant's Process Experience**

Supervisor's Name and Title \_\_\_\_\_  
Email Address \_\_\_\_\_  
Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

I verify that applicant has had a minimum of two (2) years experience in process in the following or closely related areas:

- Specifying instruments and control systems
- Programming PLCs
- SIL verification calculations
- Creation/modification of I&C design documents (e.g., process flow diagrams, P&IDs, loop diagrams, etc.)
- Supporting start-up (including installation, commissioning, etc.)
- Operation of process plants/facilities

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section E. EMPLOYMENT SUMMARY**

**All applicants must complete Section E.** Starting with your most recent job and working back, complete the information below to document your five (5) years work experience in the process industry. Make copies of this page if needed. **You must include all information for each position listed for your application to be approved.**

***Work Experience 1***

Employer \_\_\_\_\_

Your Job Title \_\_\_\_\_

Employer Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_

Supervisor's Telephone (\_\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_

Description of Job Duties and Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Work Experience 2***

Employer \_\_\_\_\_

Your Job Title \_\_\_\_\_

Employer Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_

Supervisor's Telephone (\_\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_

Description of Job Duties and Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COMPLIANCE WITH CERTIFICATE CRITERIA AND QUALIFICATIONS**

I certify that the information I have provided in this application is complete and accurate to the best of my knowledge and belief. I authorize ISA to contact my current and any former employers to verify the provided information, and I waive any and all rights of confidentiality or privacy with regard to the release of all employment history related to my application for recognition as a ISA84 SIL Selection Specialist or a ISA84 SIL Verification Specialist.

I hereby waive and release ISA, my current and former employers, and their respective officers, directors, and representatives, from any claims arising from the disclosure of such information to ISA for the purposes of ISA evaluation of this application. I understand that ISA will reject any application that contains false or fraudulent information, and that, in that event, I will not receive reimbursement of any fees paid, nor credit for any examinations taken. If the fraud is discovered after the certificate is awarded, it will be revoked.

The ISA84 Safety Certificate program provides recognition and documentation of a professional's understanding and application of the ISA84 standard. Achieving these certificates does not guarantee a level of performance by a professional in a particular situation, and ISA does not guarantee the competency or performance of any certificate holder. I understand and agree that any certificate granted by ISA does not constitute licensure to practice or provide services, whether for a fee or not, when required by federal, state, or local law. I further understand and agree that I must apply for any state required licenses for practice in the specialty field only through the applicable state agencies. I understand that all material submitted related to this application becomes the property of ISA upon receipt and that none of the materials will be returned to me. ISA will release no information contained in the application materials to any third party.

I understand that any certificate by ISA is limited to a three year period and must be renewed according to ISA's renewal policies in order to continue as an ISA84 Safety Certificate holder.

I understand that it is my responsibility to review the requirements and prerequisites thoroughly and if my application does not meet the requirements or the prerequisites are not completed, I will not be able to sit for the exam. The course fee is non-refundable.

I hereby request that ISA include me in any published listings online or in print of ISA84 Safety Specialist Certificate holders. I agree to follow the ISA Code of Ethics, and agree that I will not discuss exam questions with any other person.

\_\_\_\_\_ *signature of applicant* \_\_\_\_\_ *date*

<p><b>Payment</b> Please indicate method of payment:</p> <p><input type="checkbox"/> <b>Credit Card</b> (considered pre-paid): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card</p> <p>Account No. _____</p> <p>Expiration Date _____</p> <p>Signature _____</p> <p>Date _____</p>	<p style="text-align: center;"><b>ENTER TOTAL AMOUNT DUE HERE</b> \$ _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>PLEASE NOTE:</b> If registration is paid other than by credit card, payment must be submitted prior to course attendance. If not received in advance, your seat in the course is not guaranteed.</p> </div> <p><input type="checkbox"/> <b>Check*</b> <input type="checkbox"/> <b>Money Order*</b> <input type="checkbox"/> <b>Purchase Order No.</b> _____ <b>(*Payable to ISA)</b></p> <p><b>SPECIAL NOTE regarding transfer of international funds:</b> Credit card payment is preferred; checks with proper MICR bank encoding must be drawn on your bank's correspondent NY or other US bank. Amount payable to ISA must include any bank or other processing charges.</p> <p><b>Check method used</b> (if applicable):</p> <p><input type="checkbox"/> Wire transfer—Please contact ISA customer service at +1 919-549-8411.</p> <p><input type="checkbox"/> Money Order—add US\$5.00 for processing.</p> <p>Payment terms Net 30 days for multimedia products. Orders outside the US and Canada are on a proforma basis. Published prices subject to change without notice.</p>
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By completing this form, you acknowledge that ISA needs the information requested here to provide you with the best possible service. Occasionally, we make this information available to companies whose products or services may be of interest to you. Review ISA's complete Privacy Statement at [www.isa.org/lawyer](http://www.isa.org/lawyer) or request a copy by calling +1 919-549-8411.

**Do not release my name and contact information to companies selling products and services.**

**Do not call me about ISA activities.**

<p><b>Send All Application materials to ISA at:</b></p> <p><b>Option 1: With check or money order payment (through regular postal delivery)</b></p> <p><b>ISA</b> ISA84 Certificate Program P.O. Box 3561 Durham, NC 27702 USA Phone: +1 919-549-8411</p>	<p><b>Option 2: With credit card payment (and for overnight delivery)</b></p> <p><b>ISA</b> ISA84 Certificate Program 67 Alexander Drive, P.O. Box 12277 Research Triangle Park, NC 27709 USA Phone: +1 919-549-8411</p>
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